

GENIE OHRENSCHALL

Nevada State Assemblywoman

Clark 12

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

CONTRIBUTOR NAME (PRINT)	DATE OF CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK #
Lorillard Tobacco Company 714 Green Valley Road Greensboro, NC 27408	11-02-02	\$ 500.00	
Foghorn Consulting, Inc. 2300 West Sahara Avenue, #1110 Las Vegas, NV 89102	11-13-02	\$ 250.00	
Silver State Taxi Associates Nellis Cab Co./Desert Cab Co. 3215 Cinder Ln, Las Vegas, NV 89103	01-03-03	\$1,000.00	
Millenium Assembly Leadership Fund 2368 Tilden Way Henderson, NV 89074	01-03-03	\$1,000.00	

This page may be copied or duplicated if additional space is needed.

GENIE OHRENSCHALL
Name (print)

Nevada State Assemblywoman
Office (if applicable)

Clark 12
District (if applicable)

Contributions of \$100 or Less

[illegible][illegible]

This page may be copied or duplicated if additional space is needed.

GENIE OHRENSCHALL

Nevada State Assemblywoman

Clark 12

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	Report
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**** NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

GENIE OHRENSCHALL

Nevada State Assemblywoman

Clark 12

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION TO WHOM THE EXPENSE WAS INCURRED	CATEGORY	DATE OF EXPENSE	AMOUNT OF EXPENSE
Time Printing, Inc. 1224 Western Avenue Las Vegas, NV 89102	D,J	12-18-02	\$2,838.02
Katie Ross 1124 So. 15th St. Las Vegas, NV 89104-1740	E	various	\$2,050.00
John Ohrenschall 1124 So. 15th St. Las Vegas, NV 89104-1740	E	various	\$ 800.00
Alexi Taryn Las Vegas, NV	H	various	\$ 625.00
James Ohrenschall 1124 So. 15th St. Las Vegas, NV 89104-1740	F F	10-31-02 12-27-02	\$ 500.00 \$ 100.00
Sprint	A	various	\$ 581.85
AT&T Wireless	A,B A,B	11-03-02 11-25-02	\$ 232.01 \$ 261.95
U.S. Postmaster	A	various	\$ 302.38
Ritsa Orlando 5809 Apple Valley Lane Las Vegas, NV 89108	C	11-30-02	\$ 200.00

This page may be copied or duplicated if additional space is needed.

GENIE OHRENSCHALL
Name (print)

Nevada State Assemblywoman
Office (if applicable)

Clark 12
District (if applicable)

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON WHO PAID OR ORGANIZATION WHO PAID THE EXPENSE	CATEGORY	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
John Ponticello Las Vegas, NV	H	01-01-03	\$ 250.00

This page may be copied or duplicated if additional space is needed.

GENIE OHRENSCHALL

Nevada State Assemblywoman

Clark 12

Name (print)

Office (if applicable)

District (if applicable)

Expenses of \$100 or Less

DATE OF EXPENSE	AMOUNT OF EXPENSE	CATEGORY
10-31-02	\$75.00	H,J
11-04-02	\$ 8.82	H,J
11-14-02	\$10.66	H,B,J
11-18-02	\$21.34	A,B,D,F,H,J
11-22-02	\$30.00	H,J
12-07-02	\$15.01	A
12-07-02	\$53.92	A,B,D,F,H,J
12-09-02	\$44.98	A
12-11-02	\$22.78	A
12-26-02	\$22.00	A
01-01-03	\$15.00	H,J
01-03-03	\$99.50	H

DATE OF EXPENSE	AMOUNT OF EXPENSE	CATEGORY

This page may be copied or duplicated if additional space is needed.

IN KIND CONTRIBUTIONS AND EXPENSES REPORT

NRS 294A.362 REQUIRES IN KIND CONTRIBUTIONS AND EXPENSES TO BE REPORTED SEPARATELY. REPORT ALL IN KIND CONTRIBUTION AND EXPENSES ON THE FOLLOWING PAGES.

IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

GENIE OHRENSCHALL
Name (print)

Nevada State Assemblywoman
Office (if applicable)

Clark 12
District (if applicable)

IN KIND

Contributions In Excess of \$100 or, When Added Together from One Contributor Exceeds \$100

NAME OF CONTRIBUTOR	DATE OF CONTRIBUTION	AMOUNT OF CONTRIBUTION	CONTRIBUTOR'S ADDRESS	CONTRIBUTOR'S PHONE
N/A	N/A	N/A	None	

This page may be copied or duplicated if additional space is needed.

GENIE OHRENSCHALL

Nevada State Assemblywoman

Clark 12

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions of \$100 or Less

DATE OF EACH INDIVIDUAL CONTRIBUTION	DESCRIPTION OF IN KIND CONTRIBUTION	VALUE OR COST OF EACH CONTRIBUTION
N/A	N/A	None

This page may be copied or duplicated if additional space is needed.

GENIE OHRENSCHALL

Nevada State Assemblywoman

Clark 12

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON OR ORGANIZATION WHO RECEIVED THE IN-KIND SERVICE	DESCRIPTION OF IN-KIND SERVICE	DATE OF EACH IN-KIND EXPENSE	AMOUNT OF EACH IN-KIND EXPENSE
N/A	N/A	N/A	None

This page may be copied or duplicated if additional space is needed.